

SLR:dm 6395-61708 258688.doc 03/02/04

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**PLEASE DELIVER DIRECTLY TO EXAMINER JA-NA A. HINES****Fax No.:** 571-273-0859**Total No. Pages:** 9 including this cover sheet

**Message:** Transmitted herewith for filing in the above-identified application is a Supplemental Amendment. If you do not receive all pages or if you have problems receiving transmittal, please call Sheree Lynn Rybak, Ph.D. at (503) 226-7391. The fee (large entity) has been calculated as shown below.

**In re application of:** Martinez et al.**Application No.** 10/009,660**Filed:** December 7, 2001**Confirmation No.** 1922**For:** METHODS AND COMPOSITIONS FOR  
OPSONOPHAGOCYTIC ASSAYS**Examiner:** Ja-Na A. Hines**Art Unit:** 1645**Attorney Reference No.** 6395-61708**CERTIFICATE OF FACSIMILE**

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being facsimile transmitted to fax number 571-273-0859 on the date shown below.

Attorney  
for Applicant(s)Date Transmitted March 2, 2004

| FEE CALCULATION FOR CLAIMS AS AMENDED |                     |                         |       |         |         |  |
|---------------------------------------|---------------------|-------------------------|-------|---------|---------|--|
| For                                   | No. after amendment | No. paid for previously | Extra | Rate    | Fee     |  |
| Total Claims                          | 33                  | - 29*                   | = 4   | \$18.00 | \$72.00 |  |
| Indep.                                | 5                   | - 5**                   | = 0   | \$86.00 | \$0.00  |  |
| TOTAL FEE FOR THIS AMENDMENT          |                     |                         |       |         | \$72.00 |  |

\*greater of twenty or number for which fee has been paid. \*\*greater of three or number for which fee has been paid.

☒ Please charge this fee and any additional fees that may be required in connection with filing of this Supplemental Amendment to Deposit Account 02-4550.

  
Sheree Lynn Rybak, Ph.D.  
Registration No. 47,913

March 2, 2004  
Date

cc: Docketing  
Accounting

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WDN:SLR 03/02/04 258164.doc  
PATENT

Attorney Reference Number 6395-61708  
Application Number 10/009,660

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**In re application of:** Martinez et al.

**Application No.** 10/009,660

**Filed:** December 7, 2001

**Confirmation No.** 1922

**For:** METHODS AND COMPOSITIONS FOR  
OPSONOPHAGOCYTIC ASSAYS

**Examiner:** Ja-Na A. Hines

**Art Unit:** 1645

**Attorney Reference No.** 6395-61708

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as being attached or enclosed herewith are being faxed to 1-  
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Attorney  
for Applicant(s)

Date Mailed March 2, 2004

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

**SUPPLEMENTAL AMENDMENT**

Please amend the referenced application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2.

**Remarks** begin on page 8.